

PERSONNEL ACTION FORM

Print Form

Last Name: Prentice

First Name: Alyce

M.I.:

Current Supervisor: Xochitl Avellan

Dept: EdTeam

Clock ID (HR Use Only):

CHECK ONE OF THE FOLLOWING:

☐ Teacher

☐ Substitute

☐ Classified

☒ Home Office

☒ Administrator

CURRENT

NEW CHANGE

EFFECTIVE DATE* 1st or 16th only

☐ Region (e.g., NTL, TN, CA)

☒ School Site/Dept. Name

Leadership

EdTeam

10/1/17

☒ Job Title

Principal

Area Superintendent

10/1/17

☒ Supervisor

Xochitl Avellan

Edm Gibbins

10/1/17

☒ Salary

140,000

10/1/17

☐ Retirement (e.g., STRS)

☐ Union (e.g., CTA)

☐ Department (HR only)

☐ Prorate Check

☐ Retroactive Pay

☐ Transfer Per. Leave

☐ Split Pay to Locations(s):

CHECK ALL APPLICABLE:

☐ Full Benefits

☐ No Benefits

☐ Full-Time

☐ Part-Time%:

COMMENTS:

SUPERVISOR NAME:

Annett Gonzalez

Signature:

Date:

9/15/17

COMP COMMITTEE:

Signature:

Date:

HUMAN RESOURCES:

Natasha Gomez

Signature:

Natasha Gomez

Date:

10/9/17

PLEASE SUBMIT TO ATTN: HUMAN RESOURCES